	Combined Declaration For Patent Application and Power of Attorney							ATTORNEY DOCKET 82251DMW				
İ	As below named inventor, I hereby declare that:											
	My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
	METHOD AND SYSTEM FOR PROCESSING IMAGES FOR THEMED IMAGING SERVICES											
	The specification of which (check only one item below):											
	is attached hereto.											
	······································	was filed as United States Application Serial No. on and was amended on (if applicable).										
	was filed as PCT internat	ed as PCT international application Number on and was amended on (if applicable).										
	I hereby state that I have reviewed	l and understand t	he contents of the	above	-identified specification, in	cluding the	claims, as	as amended by any amendment				
		erred to above. cknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material topatentability as defined in Title Code of Federal Regulations, §1.56.										
	I hereby claim foreign priority be	nefits under Title										
	and have also identified below ar	ny foreign applica	tions(s) for paten	on(s) which designates at least one country other than the United States of America, listed below s) for patent or inventor's certificate or any PCT international application(s) designating a least by me on the same subject matter having a filing date before that of the application(s) of which								
II.	priority is claimed: PRIOR FOREIGN/PCT APPLI	CATION(S) AND	ANY PRIORIT	Y CLA	IMS UNDER 35 U.S.C.	119:						
	COUNTRY (# PCT indicate PCT)	API	PLICATION NUMBER		DATE OF FILING (mnth/doyyear)		P	RIORITY CLAIMED L	RITY CLAIMED UNDER 35 USC §119			
=	In the state of th							YES		NO		
								YES		NO NO		
					l				Ĺ			
	I hereby claim the benefit under Title 35, United States Code, 119 \S (e) of any United States provisional application(s) listed below:											
Ti.	PRIOR PROVISIONAL APPLI	RIOR PROVISIONAL APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §119 (e):										
	PROVISIONAL AF	PROVISIONAL APPLICATION NUMBER				FILING DATE (month/day/year)						
	I hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/thos prior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material topatentability as defined in Title 37, Code of Federal Regulations §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:											
	PRIOR US APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S FOR BENEFIT UNDER 35USC§120:											
	U.S APPLICATIONS			DNS			STATUS (Check one)					
	U.S. APPLICATION NUM	BER		US FII	LING DATE	PATENTI	ED	PENDING	ABA	ANDONED		
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	PCT APPLICATIONS DESIGNATING THE U.S.											
	PCT APPLICATION NO	PCT FILII	NG DATE		U S SERIAL NUMBERS ASSIGNED (if any)			·				
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Combined Declaration For Patent Application and Power of Attorney (Continued)	ATTORNEY DOCKE
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POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Se	Patent Legal Staff Eastman Kodak Company 343 State Street Rochester, NY 14650-2201			Direct Telephone Calls to: (name and telephone number) David M. Woods		
				(716) 477-5256 FAX: (716) 477-4646		
2	FULL NAME OF INVENTOR	FAMILY NAME Nicponski	FIRST GIVEN NAME Henry	SECOND GIVEN NAME		
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1	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA		
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
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2	BUSINESS ADDRESS ADDRESS		CITY	STATE & ZIP CODE (COUNTRY)		
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
3	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)		
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
	RESIDENCE & CITY CITZENSHIP		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
4	BUSINESS ADORESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)		
4 2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
5	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)		
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
٥	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
6	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203	
Henry Negronsk			
DATE C	DATE	DATE	
1-8-02			
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206	
DATE	DATE	DATE	
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